PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 09/494,801

	, ,	CLAIMS A	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE			OTHER THAN						
TO	TAL CLAIMS							RATE	FEE	7	RATE	FEE					
FC	PR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00					
ТС	TAL CHARGE	ABLE CLAIMS	21 mir	nus 20=	*			X\$ 9=		OR	X\$1.8=						
INC	EPENDENT CI	LAIMS	6 minus 3 = *					X43=		OR	X86=						
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=						
* If	the difference		TOTAL		OR	TOTAL											
	С	LAIMS AS A	MENDE	OTHER THAN													
9	(N.E)	(Column 1)		(Column 3)	1 <i>-</i>	SMALL		OR	SMALL								
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	*	Minus	* á	0	=		X\$ 9=		OR	X\$18=						
	Independent	*	Minus	***	3	=		X43=		OR	X86=						
_	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=						
				L	TOTAL ADDIT, FEE	: :::	OR	TOTAL ADDIT. FEE									
H		(Column 1)	•	(Colum	nn 2)	(Column 3)		10011.1-22									
AMENDMENT .		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE :	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=						
ME	Independent	*	Minus	***		=		X43=		OR	X86=						
L	FIRST PRESE	NTATION OF MU	!	.145		- 4	+290=										
							L	+145= TOTAL		OR	TOTAL	•					
_		•		٠			. 🛕	DDIT. FEE		OR	ADDIT. FEE						
卫		(Column 1)		(Column 3)													
AMENDMENT		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=						
	Independent	*	Minus	***		=		X43=		OR	X86=	·					
Ĺ	FIRST PRESE	+145=			+290=												
		mn 1 is less than th					L	TOTAL		OR OR	TOTAL						
***	If the "Highest Nu	mber Previously Pa mber Previously Pa	aid For IN THI	S SPACE is	less that	n 3, enter *3.*		DDIT FEE	•		ADDIT. FEE						
	The "Highest Num	nber Previously Pai	d For" (Total or	Independe	nt) is the	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

										~	oc. /	s or C	ocket Nur	nber		
PATENT APPLICATION FEE DETERMINATION RECO Effective atober 1, 2000										91 494, 801						
CLAIMS AS FILED - PART I											YTITME	/	OTHER	R THAN		
Ļ	00		(Column 1) (Column 2)						TYP			OR	SMALL	ENTITY		
Ľ	OR		NUMBER FILED NUMBER EXTRA						RATI		FEE		RATE	FEE		
B	ASIC FEE										\$ 376	OR		\$750		
T	OTAL CLAIMS		2	minus		*			X\$ 9	=		OR	X\$18=			
121	DEPENDENT C	LAIMS		6 minus	3	•	3		X42	-		OR	XESJ=			
M	MULTIPLE DEPENDENT CLAIM PRESENT								+125			OR	+280=			
* (* If the difference in column 1 is less than zero, enter "0" in column 2											OR	TOTAL	 		
	CLAIMS AS AMENDED - PART II											3	OTHER	THAN		
ì	(Column 1) (Column 2) (Column 3)								SMAL	LE	NTITY	OR	SMALL			
AMENDMENTA		REN	AIMS IAINING FTER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE		
₩ Q	Total .	* 6	18	Minus	nin	21	= /		X\$ 9=	-		OR	X\$18=			
AME	Independent	*	3	Minus	dete		= /		X40=			OR	X9 // =			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									4740-	. $ au$		0.5	+250=			
									# <i>\$</i> (0)*	<u>_Ł</u>		OR		 -		
9							3	4	ADDIT. FE			OR,	ADDIT. FEE	L		
B	letterete de chrones		umn 1) AIMS	Introduction states		Column 2) HIGHEST	(Column 3)			_				· · · · ·		
AMENDMENT B		REM	AINING FTER COMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	-	ADDI- TONAL FEE		RATE	ADDI- TIONA FEE		
NON	Total	•	//	Minus	**	21	=/		X\$ 9=	1		OR	X\$18=			
AME	Independent	•	6	Minus	***	<u> </u>	= /	1	X42=	1	3	OR	x <i>0</i> / <u>+</u>			
	FIRST PRESE	NTATIC	ON OF M	ULTIPLE DE	PENO	ENT CLAIM			+148=	1		OR	+200=			
								L	TOTA	T			TOTAL	<u>.</u>		
P		(Cole	umn 1)		(C	olumn 2)	(Column 3)	•	VODIT, FE	E			ADDIT. FEE			
GR.		α	AIMS		1	HIGHEST		F		L	ADDI-	1		ADDI-		
AMENDMENT @		A	AINING TER IDMENT		PA	NUMBER LEVIOUSLY PAID FOR	PRESENT EXTRA		RATE		IONAL FEE		RATE	TIONAL		
NON	Total	• _	19	Minus	**	21	= /		X\$ 9=		- 4	OR	X\$18=			
AME	Independent	٠	خ	Minus	***		- 6	ľ	X42=	1		OR	X84=			
- V	FIRST PRESE	NTATIC	N OF M	JUTIPLE DE	PEND	ENT CLAIM		ŀ		- -		J. 1				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

OR

OR ADDIT. FEE

+140=